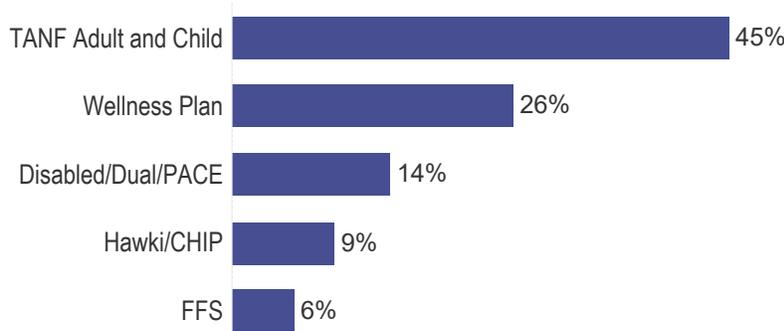


Overview - SFY 2020



Iowa Medicaid provides medically necessary healthcare coverage for financially needy adults, children, parents with children, people with disabilities, elderly people and pregnant women to help them live healthy, stable, and self-sufficient lives.

SFY 2020* **826K** or **26%** of Iowans were at some point enrolled in **IA Medicaid/CHIP**



*Counts represent distinct members enrolled in the fiscal year regardless of length of enrollment and can be higher than monthly enrollment counts. Due to COVID, member disenrollment was discontinued.

How are **Medicare** and **Medicaid** different?

Medicare

Medicaid

ADMINISTERED	Federal	State
FUNDED	Federal	Joint Federal and State
BENEFICIARIES	People age 65 and older, people under 65 with certain disabilities, and anyone with end-stage renal disease	Low-income adults, pregnant women, children, some disabled, and some elderly
COVERAGE	Consistent nationally Primary payor	Varies by state Payor of last resort

ELIGIBLES IN IOWA

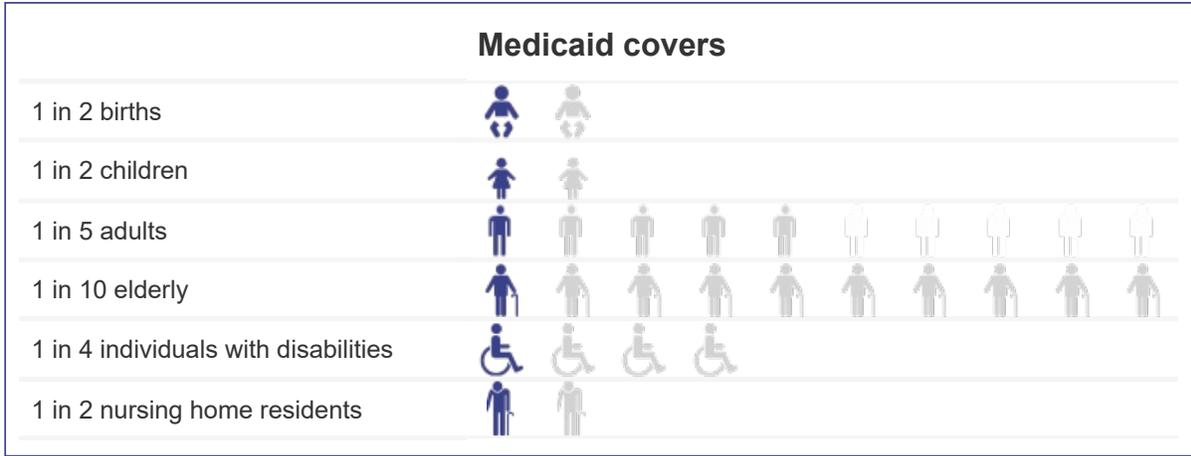


*Close to 110,000 of Iowa Medicaid eligibles are also eligible for Medicare. Iowa Medicaid pays the Medicare premiums, co-pays, and deductibles for these “dual-eligibles.” Iowa Medicaid also covers Medicaid services not covered by Medicare for these “dual-eligibles” such as stays in nursing home over/past 100 days. Medicare data is from the CMS 2018 Medicare Enrollment Section report.

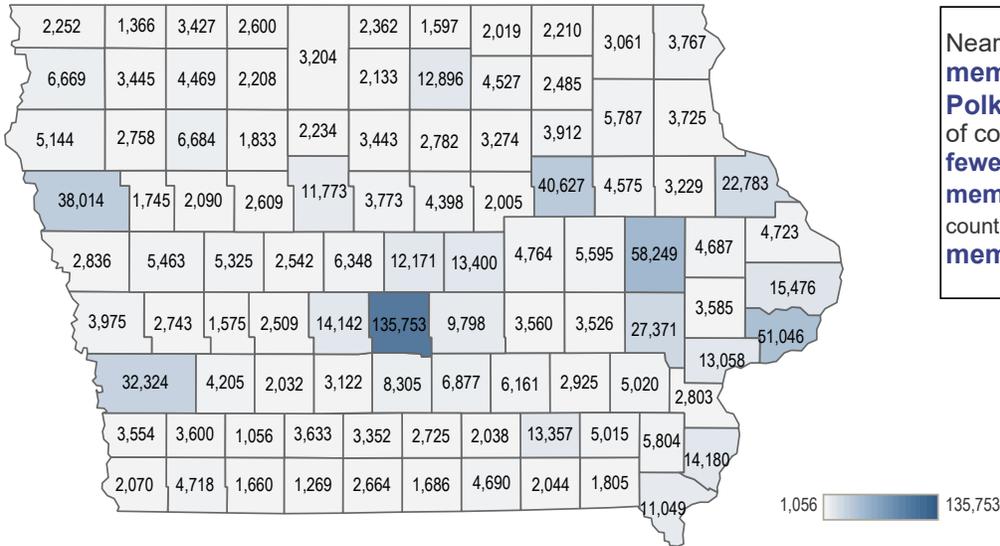
Who's Covered



Medicaid coverage is in place for 46% of births, 47% of children and 48% nursing home residence and 23% Iowan's with disabilities



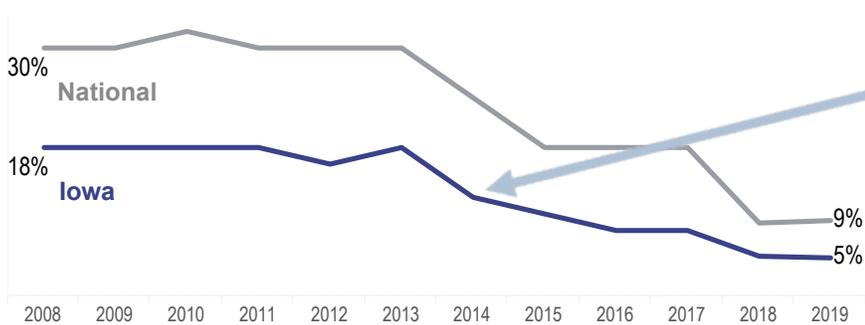
Number of Distinct Medicaid Members by County SFY 2020



Nearly **16%** of members reside in **Polk County**, **67%** of counties have **fewer than 5K members** and **32%** of counties have **5-60k members**

Iowa is a Medicaid Expansion State Under the Affordable Care Act

Percent uninsured, 2008-2019



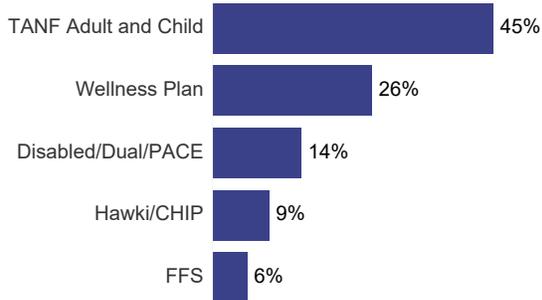
The number of uninsured Iowans has steadily decreased since Medicaid expansion was implemented in January 2014.

Cost Of Care

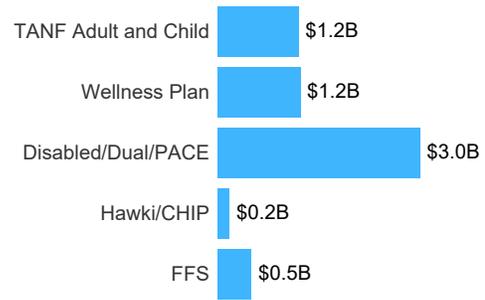


Medicaid expenditures vary by population group. Information for State Fiscal Year 2020 is displayed below. Membership represents distinct covered members within the fiscal year while expenditures represent all medical and dental capitation payments as well as Fee-For-Service (FFS) claims payments.

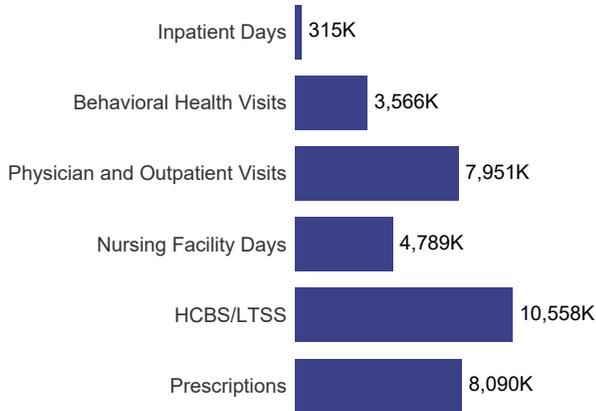
826K distinct SFY 2020 members



\$6.16B capitation and FFS claims expense



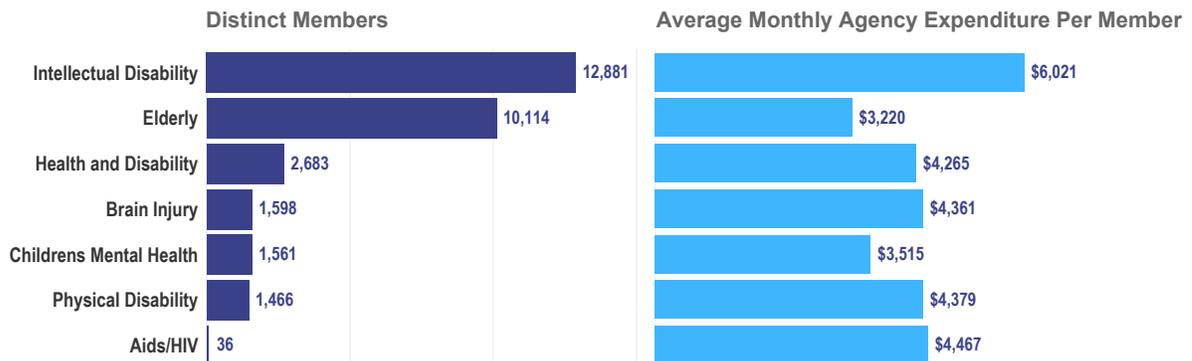
Select Services By Setting



	TANF Adult and Child	Wellness Plan	Disabled/Dual/PACE	Hawki/CHIP	FFS	Grand Total
Inpatient Days	\$202M	\$173M	\$110M	\$6M	\$32M	\$523M
Behavioral Health Visits	\$129M	\$106M	\$113M	\$14M	\$37M	\$398M
Physician and Outpatient Visits	\$322M	\$315M	\$228M	\$41M	\$87M	\$993M
Nursing Facility Days	\$4M	\$6M	\$964M	\$0M	\$57M	\$1,031M
HCBS/LTSS	\$7M	\$14M	\$824M	\$0M	\$55M	\$900M
Prescriptions	\$186M	\$275M	\$203M	\$32M	\$13M	\$709M
	\$850M	\$889M	\$2,442M	\$93M	\$280M	

Select service categories represents actual claims expenditure for both the FFS and MCO population

30K Distinct Members received expanded services under specialized waivers in SFY 2020



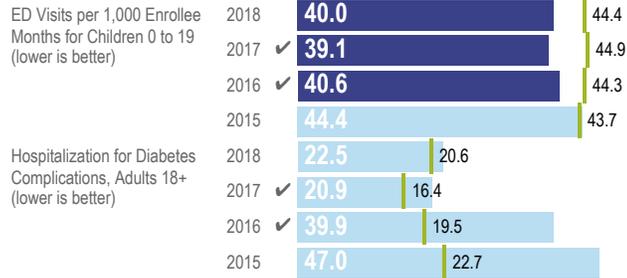
Quality and Outcomes

Iowa has made progress in reducing ED and Diabetes

Hospitalization rates

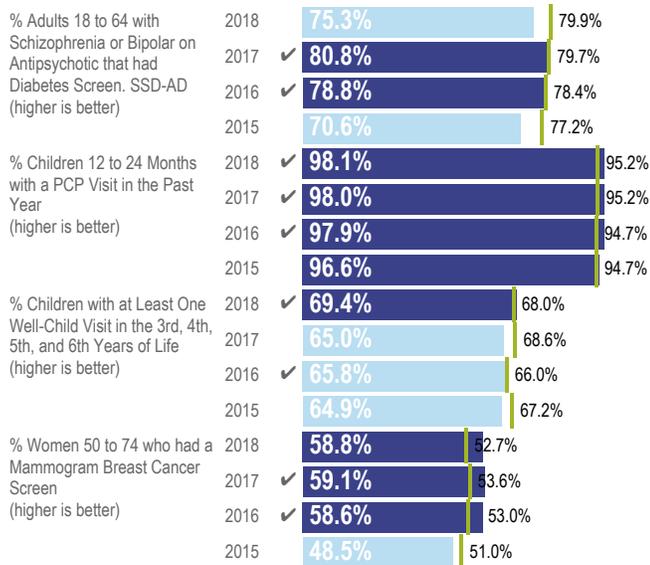
compared to **National Mean** when available
(lower is better)

Better than National mean
Worse than National mean
✓ = improvement from prior year



Most member receive key preventative services

Iowa compared to **National mean** when available (higher is better)



Adult non-emergent ED use rates are decreasing for both Amerigroup and Iowa Total Care*



Reported with 90-day lag and diagnosis code listing updated 1/1/2020



Reported with 90-day lag



Measure requires 12 months continuous enrollment and 90-day lag, ITC will start reporting SFY21Q2

Apr 2019

Mar 2020

In the Long-Term Support Services (LTSS) population from June 2018 to June 2020 the ratio of members receiving Community Based Services increased while members receiving Facility based services decreased



IA Health Link: Member Options

As of July of 2019, members have an option of Amerigroup and Iowa Total Care.

25.6 Million Claims Processed

The IA Health Link plans processed over 25.6 M medical claims in SFY 20, less than 1 in 12,500 claims resulted in appeals. Average time from receipt to payment was under 8 days for pharmacy claims.

Iowa Managed Care Program: Administered Effectively

	Amerigroup	Iowa Total Care
Fiscal Year-End Member Count	400,127	278,921
Waiver Members reporting their services make life better	99.5%	89.5%
Average days for pharmacy prior authorizations	<1	<1
Average days to complete non-pharmacy authorization	2.8	2.3
Average days to process pharmacy claims	11	4.1
Average days to pay medical claim	6.8	*

* clean claim process configuration prohibited capture of this measure